



PART B - FEE(S) TRANSMITTAL

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22850 7590 10/27/2005

CUSTOMER NUMBER
22850

01/25/2006 MBEYENE2 00000008 10618761

01 FC-1501	1400.00	00	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
02 FC-1 APPLICATION NO.	FILING DATE	00	Makoto Ouchi	240348US0X	8453

TITLE OF INVENTION: POLYLACTIC ACID COMPOSITE MATERIAL AND MOLDED BODY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	01/27/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS	
LIPMAN, BERNARD		1713		523-205000	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 OBLON, SEWALI,
2 MCCLELLAND, MAIER
3 & NEUSTADT, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

1) KABUSHIKI KAISHA TOYOTA CHUO KENKYUSHO 1) Aichi-gun, JAPAN
2) TOYOTA JIDOSHA KABUSHIKI KAISHA 2) Toyota-shi, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name Joseph Scafetta, Jr.

Date

JAN 23 2006

Registration No.

Reg. No. 26,803

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